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NEW HAMPSHIRE DEPARTMENT OF STATE

111 OF		STATE OF NEW HAMPSHIKE
		2017 Statement of Income and Expenses
		for LOBBYISTS
		(RSA Chapter 15)
	PLEASE PRINT	
	I LEASE I KINI	

I. Nam	e of Lobbyis	t(s) Robert E	. Dunn, Jr.; Tei	resa R. Ro	senberger;	George Da	na Bisbee
II. Nan	ne of lobbyis	t's partnership	, firm or corporation	on, if any:			
		Devine.	Millimet & Bran	ch, PA			
	(N		p, firm or corporation)				
		15 North	Main Street, St	uite 300. C	oncord, NH	03301	
Busines	s Address: (Street)	(Town/		(Stat		(Zip Code)
		covers: (Choos			tr each client, O	osenberger	nemillimet.com @devinemillimet.com vinemillimet.com a separate report for
_ All	reportable tra	insactions occu	rring in the months p	orior to the rep	orting date rela	tive to the follo	owing client:
		N/A					
<u>OR</u>		(Full Name o	f Client as it appears o	n the Lobbyist	Registration For	n)	
_ All 1	reportable tra ed to any part		e lobbyist (including	the lobbyist's	s family), or the	lobbying firm	listed below which are
IV. Dat	te of Report	April 26, 2 ivity from date o	017 🗴 fregistration to 3/31/1	7 acti	July 26, 201 vity from 4/1/17		
		October 25 activity from 7	i, 2017	act	January 31, 2 ivity from 10/1/1		
If this b		l, complete just	eived and no repo this form and submit				
VI. Che	eck if additio	nal reports ar	e attached:				
		-	de expenditures, you	must file Ad	dendum A-Fe	es and Expense	es
	ou have paid e Reimburser		or reimbursed exper	nses, you mus	t file Addendu	m B Report o	f Honorariums or
X Ify	ou, your firm	, or your famil	y has made political	contributions,	you must file A	Addendum C-	Political Contributions
I have r and con Signa	read RSA 15, hiplete to the laure of lobbyi	pest of my knows		4 and hereby	swear or affirm	that the forego	ing information is true
	ert E. Dun Name of lobb						



I. Name of Lobbyist(s) <u>f</u>	Robert E. Dunn, Jr.; 1	eresa R. Rosenberg	ger; Geo	rge Dana Bisbee
II. Name of lobbyist's p	partnership, firm or cor	poration, if any:		
	Devine, Millimet & Bra	nch, PA		·
(Name of	partnership, firm or corporation)			
III. Name of Client	I/A		Date	April 26, 2017
	s ibution that is reportable j ying firm, indicate the fo		r 664 paid	on behalf of the
Full name of candidate:	Committee to Elect		(3.6:3.9)	N
	(Last Name)	(First Name)		e Name/Initial)
Amount of contribution \$		Office Candidate is S	Seeking	
	NH Senate Democ	atic Caucus		
	(Last Name)	(First Name)	,	e Name/Initial)
Amount of contribution \$	250	Office Candidate is S	eeking	
	-kind contribution, provide contribution on the line abound the word "estimate."			
Full name of candidate:	Kahn lav			
		(Fire N	(3.5.1.11	No. of the D
	(Last Name)	(First Name) Office Candidate is S	•	e Name/Initial)

D	evine, Millimet & Brai	nch, PA	
(Name of p	partnership, firm or corporation)		
II. Name of ClientN	/A		
			664 paid on behalf of the
full name of candidate:	McGilvray, Scott (Last Name)	(First Name)	(Middle Name/Initial)
		Ì	
Amount of contribution \$ _	100	Office Candidate is Se	eking State Senate
iull name of candidate.	Hennessey Martha		
full name of candidate:	Hennessey, Martha	(First Name)	(Middle Name/Initial)
	(Last Name)	,	(Middle Name/Initial) eking State Senate
Amount of contribution \$ _ f the contribution is an in- actual cost of the in-kind co	(Last Name) 100 kind contribution, provide a ontribution on the line above	Office Candidate is Sedescription of the goods of	eking <u>State Senate</u> r services provided, and enter th
Amount of contribution \$_ if the contribution is an in- actual cost of the in-kind conter an estimated value an	(Last Name) 100 kind contribution, provide a ontribution on the line above and the word "estimate."	Office Candidate is Sedescription of the goods of	
Amount of contribution \$ _	(Last Name) 100 kind contribution, provide a ontribution on the line above and the word "estimate."	Office Candidate is Sedescription of the goods of	eking <u>State Senate</u> r services provided, and enter th

I. Name of Lobbyist(s) F	Robert E. Dunn, Jr.; Te	eresa R. Rosenberg	er: Geo	rge Dana Bisbee
II. Name of lobbyist's p	artnership, firm or corp	oration, if any:		
(Name of p	evine, Millimet & Brar partnership, firm or corporation)	nch, PA		
III. Name of ClientN	/A		Date	April 26, 2017
	bution that is reportable point firm, indicate the following firm.		664 paid	on behalf of the
Full name of candidate:	Committee to Elect (Last Name)	House Republicans (First Name)	(Middl	e Name/Initial)
Amount of contribution \$	250	Office Candidate is S	eeking	
i an name of canadate.	(Last Name)	(First Name)	(Middle	e Name/Initial)
Amount of contribution \$	100	Office Candidate is Se	eking	State Senate
	kind contribution, provide a ontribution on the line above and the word "estimate."			
Full name of candidate:	Gannon, William (Last Name)	(First Name)	(Middl	e Name/Initial)
Amount of contribution \$	100	Office Candidate is Se	ekina (State Senate

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II. Name of lobbyist'	s partnership, firm or cor	poration, if any:	
	Devine, Millimet & Bra	anch PA	
(Name	of partnership, firm or corporation)	3.10.1,	
III. Name of Client	N/A	I	DateApril 26, 2017
Political Contribution	ons		
-		pursuant to RSA Chapter 66	4 paid on behalf of the
client/lobbyist and lo	bbying firm, indicate the fo	llowing:	
Full name of candida	te: Kennev, Joe		
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution	s 250	Office Candidate is Seek	ing Executive Council
	· · · · · · · · · · · · · · · · · · ·		
	e and the word "estimate."	ve for amount of contribution.	If the actual cost is not know
enter an estimated value	e and the word "estimate."	ve for amount of contribution.	If the actual cost is not known
	e and the word "estimate."	(First Name)	If the actual cost is not known (Middle Name/Initial)
enter an estimated value	te: Feltes, Dan (Last Name)		(Middle Name/Initial)
Full name of candida Amount of contribution is an actual cost of the in-kin	te: Feltes, Dan (Last Name) \$ 100 in-kind contribution, provide	(First Name)	(Middle Name/Initial) Ing State Senate ervices provided, and enter th
Full name of candida Amount of contribution is an actual cost of the in-kin	te: Feltes, Dan (Last Name) in-kind contribution, provide d contribution on the line abo	(First Name)Office Candidate is Seeki	(Middle Name/Initial) Ing State Senate ervices provided, and enter the
Full name of candida Amount of contribution is an actual cost of the in-kin	te: Feltes, Dan (Last Name) in-kind contribution, provide d contribution on the line abo	(First Name)Office Candidate is Seeki	(Middle Name/Initial) Ing State Senate ervices provided, and enter the
Full name of candida Amount of contribution If the contribution is an actual cost of the in-kin enter an estimated value	te: Feltes, Dan (Last Name) \$ 100 in-kind contribution, provide d contribution on the line above and the word "estimate."	(First Name)Office Candidate is Seeki	(Middle Name/Initial) Ing State Senate ervices provided, and enter the
Full name of candida Amount of contribution is an actual cost of the in-kin	te: Feltes, Dan (Last Name) \$ 100 in-kind contribution, provide d contribution on the line above and the word "estimate."	(First Name)Office Candidate is Seeki	(Middle Name/Initial) Ing State Senate ervices provided, and enter th

_			
(Name of n	evine, Millimet & Bra artnership, firm or corporation)	nch, PA	
			D
III. Name of ClientN	/A		DateApril 26, 2017_
Political Contributions For each political contributions client/lobbyist and lobby	-	_	ter 664 paid on behalf of the
Full name of candidate:	Fuller Clark, Martha (Last Name)	(First Name)	(Middle Name/Initial)
A A . C 4.21416			
Amount of contribution \$ _	100	Office Candidate is	s Seeking State Senate
Full name of candidate:			
Full name of candidate:	Soucy, Donna (Last Name)	(First Name)	(Middle Name/Initial)
Full name of candidate: Amount of contribution \$ _	(Last Name)		(Middle Name/Initial) s SeekingState Senate
Amount of contribution \$ _ If the contribution is an in- actual cost of the in-kind co	(Last Name) 100 kind contribution, provide contribution on the line above	Office Candidate is	Seeking <u>State Senate</u> ds or services provided, and enter the
Amount of contribution \$ _ If the contribution is an in- actual cost of the in-kind co	(Last Name) 100 kind contribution, provide contribution on the line above	Office Candidate is	Seeking <u>State Senate</u> Is or services provided, and enter the
Amount of contribution \$ _ If the contribution is an in-	(Last Name) 100 kind contribution, provide ontribution on the line above the word "estimate." Woodburn, Jeff	Office Candidate is a description of the good we for amount of contributions.	s Seeking State Senate ds or services provided, and enter the ution. If the actual cost is not known
Amount of contribution \$_ If the contribution is an in- actual cost of the in-kind co enter an estimated value an	(Last Name) 100 kind contribution, provide contribution on the line above the word "estimate."	Office Candidate is	Seeking <u>State Senate</u> Is or services provided, and enter the

I. Name of Lobbyist(s) _	Robert E. Dunn, Jr.; To	eresa R. Rosenbe	erger; George Dana Bisbee
-	oartnership, firm or corp Devine, Millimet & Bra		
(Name of	partnership, firm or corporation)		
III. Name of Client	N/A		Date April 26, 2017
			ter 664 paid on behalf of the
Full name of candidate:	D'Allesandro, Lou	(First Name)	(Middle Name/Initial)
Amount of contribution \$	100		Seeking State Senate
enter an estimated value a	nd the word "estimate."	Tot amount of contribu	tion. If the actual cost is not known,
i un name of candidate.	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	100	Office Candidate is	Seeking State Senate
	contribution on the line above		s or services provided, and enter the tion. If the actual cost is not known,
Full name of candidate:	Sanborn, Andy (Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	125	Office Candidate is	Seeking State Senate

I. Name of Lobbyist(s) _	Robert E. Dunn, Jr.; I	eresa R. Rosenbe	erger; George Dana Bisbee
II. Name of lobbyist's	partnership, firm or corp	•	
	Devine, Millimet & Bra	nch, PA	
(Name of	partnership, firm or corporation)		
III. Name of Client	N/A		Date April 26, 2017
-	•	_	ter 664 paid on behalf of the
Full name of candidate	Morse, Chuck (Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	•		Seeking State Senate
		1 ' (4 1	s or services provided, and enter the
actual cost of the in-kind enter an estimated value a		for amount of contribu	tion. If the actual cost is not known,
Full name of candidate	Avard, Kevin(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$		•	Seeking State Senate
If the contribution is an ir	n-kind contribution, provide a contribution on the line above	description of the good	s or services provided, and enter the actual cost is not known,
Full name of candidate		(First Name)	(Middle Name/Initial)
Full name of candidate	(Last Name)	(First Name)	(Middle Name/Initial) Seeking State Senate

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I. Name of Lobbyist(s) _	Robert E. Dunn, Jr.; I	eresa R. Rosenber	ger; George Dana Bisbee
-	oartnership, firm or corp Devine, Millimet & Bra		
(Name of	partnership, firm or corporation)		
III. Name of Client	N/A		Date <u>April 26, 2017</u>
			er 664 paid on behalf of the
Full name of candidate:		(F: -2)	(Middle Name/Initial)
	(Last Name)	(First Name)	Ì
Amount of contribution \$	100	Office Candidate is S	Seeking State Senate
Full name of candidate	Gray, James		
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	100	Office Candidate is S	Seeking State Senate
	contribution on the line abov		or services provided, and enter the ion. If the actual cost is not known.
Full name of candidate		(First Name)	(Middle Name/Initial)
Full name of candidate Amount of contribution \$	(Last Name)	(First Name)	(Middle Name/Initial) Seeking State Senate

(Name of pa	artnership, firm or corporation)		
III. Name of Client N	J/A		Date April 26, 2017
Political Contributions For each political contributions client/lobbyist and lobby			er 664 paid on behalf of the
Full name of candidate:	Pappas, Chris	(First Name)	(Middle Name/Initial)
	,	·	`
Amount of contribution \$ _		Office Candidate is	Seeking Executive Council
Full name of candidate:	Giuda. Bob		
Full name of candidate:	Giuda, Bob (Last Name)	(First Name)	(Middle Name/Initial)
	Giuda, Bob (Last Name) 100		(Middle Name/Initial) Seeking State Senate
Amount of contribution \$ _ If the contribution is an in-lactual cost of the in-kind co	(Last Name) 100 kind contribution, provide ontribution on the line above	Office Candidate is S	Seeking State Senate or services provided, and enter the
	(Last Name) 100 kind contribution, provide ontribution on the line above	Office Candidate is S	Seeking State Senate
Amount of contribution \$ _ If the contribution is an in-lactual cost of the in-kind co	(Last Name) 100 kind contribution, provide ontribution on the line above the word "estimate."	Office Candidate is S	Seeking State Senate or services provided, and enter the

•	partnership, firm or cor	•	
	Devine, Millimet & Br		
·			Date April 26, 2017
			oter 664 paid on behalf of the
Full name of candidate	: Carson, Sharon	(First Name)	(Middle Name/Initial)
Amount of contribution \$	100	Office Candidate i	s Seeking State Senate
Full name of candidate	:		
Full name of candidate	:(Last Name)	(First Name)	(Middle Name/Initial)
		(First Name)	(Middle Name/Initial)
Amount of contribution \$ If the contribution is an inactual cost of the in-kind	n-kind contribution, provide contribution on the line abo	(First Name) Office Candidate is a description of the good	(Middle Name/Initial) s Seeking ds or services provided, and enter the
Amount of contribution \$ If the contribution is an in actual cost of the in-kind enter an estimated value a	n-kind contribution, provide contribution on the line about the word "estimate."	(First Name)Office Candidate is a description of the good we for amount of contrib	(Middle Name/Initial) s Seeking ds or services provided, and enter the ution. If the actual cost is not known,
If the contribution is an ir	n-kind contribution, provide contribution on the line above and the word "estimate."	(First Name) Office Candidate is a description of the good	

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."
(If more than three contributions were made, report additional contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. (Signature of løbbyist) (Date)
Robert E. Dunn, Jr. (Print Name of lobbyist)

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Devine, Millimet & Branch, PA					
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any					
particular client): Political Contributions					
Date of Report (check one):					
April 26, 2017 ☐ July 26, 2017 ☐ October 25, 2017 ☐ January 31, 2018 ☐					
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):					
Addendum A(s).					
Addendum B(s).					
X Addendum C(s).					
I hereby swear of affirm that the foregoing information on the Statement and each Addendum is true and complete to the dest of my knowledge and belief. (Signature of lob) (Signature of lob) (Signature of lob) (Date)					
Teresa R. Rosenberger					
(Print Name of lobbyist)					

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Devine, Millimet & Branch, PA					
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any					
particular client):	Political Contributions				
Date of Report (check o	ne):				
April 26, 2017 🕱	July 26, 2017 □ Octob	er 25, 2017 🗆	January 31, 2018 □		
	· · · · · · · · · · · · · · · · · · ·		Expenses described above, and per of Addendum forms being		
Addendum A(s)					
Addendum B(s).					
X Addendum C(s).					
	ny knowledge and belief.	n on the Statement and	nd each Addendum is true and (Date)		
(Print Name of lobbyist)					